

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see Instructions on the reverse side.

IS THIS AN AMENDMENT? Tyes The



(CFA-4) **Summary Sheet**

FILE NUMBER TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFORMATION				新生产的		
Full Name of Committee (as on Statement of Organization) Check if this is a new na	me					
Anne Slamkowski for Council						
Acronym or Abbreviated Name (if any) 3. Comm			nittee Telephone Number			
STEET STATE OF A STATE OF THE S	(317) 663-321	3			
4. Mailing Address (address where all campaign finance correspondence is received)	eck if this	is a new a	ddress			
14408 Adios Pass						
5. City, State, ZIP Code	6. Party	Affiliation (îf applicable)	Independent		
Carmel, IN 46032						
CANDIDATE INFORMATION (For Candidate's Co						
7. Full Name of Candidate (include any nickname)			or If Independ	lent Candidate		
Anne Slamkowski	Indepen	ident				
9. Office Sought (Include district number, if any. Not required for exploratory committee.)	10. Cou	inty of Resi	dence Har	nilton		
District 1 Carmel City Council			-			
TYPE OF REPORT			CONVENT	ION CANDIDATES ONLY		
11. Check one:			Check one			
Pre-Primary Pre-Election Annual Nomination Other			=	onvention		
Final/Disbands Committee (lines 16, 19, and 20 must be '0') Outlgoing Treasurer (within 10 days amend Statement of 0	Organization	1)	Post-C	onvention		
12. Reporting Period:		AND DESCRIPTION OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I	LUMN A	COLUMN B		
From: June 2007 Through: August 3, 2007		1000	s Period	Year to Date		
13. Cash on hand and investments at the beginning of this reporting period.		\$0				
14. Cash on hand and investments January 1, current year.				\$0		
CONTRIBUTIONS AND RECEIPTS	ALCOHOL:					
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.)		4.450.6				
15a. Itemized (use Schedule A)		1450.0		1110.00		
15b. Unitermized		1149.0		1149.00		
15c. Add lines 15a and 15b in both columns SUBTO	OTAL	2599.0	00	2599.00		
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B	OTAL	2599.0	00	2599.00		
EXPENDITURES		State of the				
(Note: These amounts include in-kind expenditures and loan repayments.)						
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	20050	1465.2	26			
17b. Uniternized		52.93				
17c. Add lines 17a and 17b in both columns SUBT	TOTAL	1518.	19	1518.19		
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	1080.8	81	1080.81		
19. Debts OWED BY the committee (use Schedule D)		0		· · · · · · · · · · · · · · · · · · ·		
20. Debts OWED TO the committee (use Schedule E)						
				THE RESERVE OF THE PARTY OF THE		

Signature on File

FOR OFFICE USE ONLY

files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indians Campaign Finance Law commits a Class B misdemeanor, (IC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18)

CERTIFICATION



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(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (schedule for a loan proceeds and repsyments, refunds, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER					
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Page_	7	of _	4			

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1. Nyfa Johnson 317 Concord Lane Carmel, IN 46032	Contributions: Direct In-Kind (describe)			6/10/2007
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)	\$500		Anne Slamkowski
2. Cindy & Paul Skjodt 9910 Towne Road Carinel, IN 45032	Contributions: Direct In-Kind (describe)	\$500		7/6/2007
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			Anne Slamkowski
3. Terry & Tom Stamkowski 1815 Larkspur Mishawaka, IN 46545	Contributions: Direct In-Kind (describe)	\$250		7/11/2007
Contributor's Occupation (if required)	Other Receipts: Interest Loan Misc. (specify)			Anne Slamkowski
4. John Koven 14280 Oskbrook Court Carmel, IN 45033	Contributions: Direct In-Kind (describe)	\$200		7/23/2007
Contributor's Occupation (# required)	Other Receipts: Interest Loan Misc. (specify)			Anne Slamkowski
5. Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe)			
	Other Receipts: Interest Loan Misc. (specify)			
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$ 1450.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY			
(Enter total on ITE)	\$ 1450.00	国企业 对企业发展表		



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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FILE NUMBER					
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RECIPIENT'S NAME AND MAILING ADDRESS	RECIPIENT'S OCCUPATION	. TYPE OF EXPENDITURE	COLUMN A	COLUMN B	SEASON OF THE SE
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	and PURPOSE (be specific)	AMOUNT THIS PERIOD	CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
CodeA_ Maco Press 560 3 rd Avenue SW Carmel, IN 46032	Printer	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$264.93		6/22/07
Sandy Johnson 189 Amy's Run Carmel, IN 46032	Fundraising Coordinator	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$48.34	\$313.37	6/25/07
Code _A Anne Slamkowski 14408 Adios Pass Carmel IN 46032	Candidate Carmel City Council	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$965	\$1278.27	7/23/07
CodeO_ Anne Slamkowski 14408 Adios Pass Carmel IN 46032	Candidate Carmel City Council	Direct In-Kind Payment of Debt Pesturned Contribution Other Purpose:	\$137.79	\$1416.06	7/23/07
CodeO_ Sandy Johnson 189 Amys Run Carrnel IN 46032	Fundraising Coordinator	Direct In-Kind Payment of Debt Returned Cantribution Other Purpose:	\$49.20	\$1465.26	6/25/07
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	(B) (2) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	\$1465.26		1.00
TOTAL OF ALL PAGES OF SCHEDULE B ON THE LAST PAGE ONLY (Enter total on ITEM 17a of the Summary Sheet)					

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(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount; OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEST INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
		\$48.34	6/21/07	\$48.34	\$0
Sandy Johnson 189 Amys Run Carmel, IN 45032		loan			
LENDER'S OCCUPATION: fund raising coordinator					
Anne Słamkowski 14408 Adios Pass Carmel, IN 46032		\$965.00	7/2/07	\$965.00	\$0
LENDER'S GCCUPATION: candidate					
THE PROPERTY OF THE PARTY OF TH		\$137.79	7/17/07	\$137.79	\$0
Anne Slamkowski 14408 Adios Pass Carmel, IN 46032		loan			
LENDER'S OCCUPATION:candidate					
Sandy Johnson 189 Amys Run Carmel, IN 46032		\$49.20 loan	6/22/07	\$49.20	\$0
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION;					
LENDER'S OCCUPATION:					
	SUBTOTAL THIS PAGE OF SCHEDULE D				
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)				\$0	